


Electronic Filing System (EFS) Data

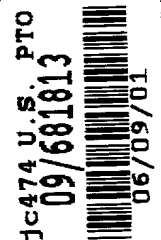
Electronic Patent Application Submission

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EFS ID:	11615	
Application ID:	09681813	
Title of Invention:	Finger-Fitting Pointing Device	
First Named Inventor:	Francis Cogan	
Domestic/Foreign Application:	Domestic Application	
Filing Date:	null	
Effective Receipt Date:	2001-06-09	
Submission Type:	Utility Patent Filing	
Filing Type:	new-utility	
Confirmation Number:	0	
Attorney Docket Number:	1043.001US1	
Digital Certificate Holder:	cn=Michael Andrew Dryja, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US	
Certificate Message Digest:	Lj0rFTpiTPS1k7//yutDjw==	
Total Fees Authorized:	\$355.0	
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Credit Card Number:	*****1000	
Expiration Date:	02282003	
Card Holder Name:	Michael Dryja	
RAM User ID:	EFSPROD	
RAM Accounting Date:	2001-06-11	
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09681813-060901

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 1043.001US1

Finger-Fitting Pointing Device

First Named Inventor: Mr. Francis F. Cohan IV

SUBMITTED BY

Name: Michael Dryja
Registration Number: 39662
Electronic Signature Mark: Michael Dryja
Date Signed: 20010609

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal	efsapds.xml
fee-transmittal	efsfee.xml
specification	001 spec.xml
declaration	DecPOA.tif

Attached Image File(s):

DecPOA.tif

Comments:

2001-06-11 10:00:00

PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Finger-Fitting Pointing Device

the specification of which is attached hereto unless the following box is checked:

() was filed on _____ as US Application Serial No. or PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined CFR 1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____
			YES: _____ NO: _____

Provisional Application

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION SERIAL NUMBER	FILING DATE

U.S. Priority Claim

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each claim of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 120, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of this application and the national or PCT international filing date of this application:

APPLICATION SERIAL NUMBER	FILING DATE	STATUS(patented/pending/abandoned)

POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) listed below to prosecute this application and transact all business in the Patent Office connected therewith.

Michael A. Dryja, Reg. No. 39662

(CUSTOMER NUMBER 23441)

SIGNATURE OF INVENTOR: Michael A. Dryja Date of Signature: Michael A. Dryja (Signature)	SIGNATURE OF ATTORNEY/AGENT: Michael A. Dryja Date of Signature: Michael A. Dryja (Signature)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and I declare that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Francis F. Cohan IV

Citizenship: US

Residence: 12840 Saratoga Rd. Apple Valley, CA US 92308

Post Office Address: Same

Inventor's Signature: Francis F. Cohan IV

Date: 6-5-2001

FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 355

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 1000
 Expiration Date: 20030228
 Authorized Name: Michael Dryja
 Billing Address: 98074

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	203	\$ 9	0	\$ 0
Independent Claims: 3	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0